

Best Available Copy

ISSUE SLIP STAPLE AREA (for additional cross references)

TO:	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	SS	JCM	2/26/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	1/26/01
2	✓	✓	1/26/01
3	✓	✓	1/26/01
4	✓	✓	1/26/01
5	✓	✓	1/26/01
6	✓	✓	1/26/01
7	✓	✓	1/26/01
8	✓	✓	1/26/01
9	✓	✓	1/26/01
10	✓	✓	1/26/01
11	✓	✓	1/26/01
12	✓	✓	1/26/01
13	✓	✓	1/26/01
14	✓	✓	1/26/01
15	✓	✓	1/26/01
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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